

# SENATE BILL No. 370

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## DIGEST OF INTRODUCED BILL

**Citations Affected:** IC 12-7-2-154.9; IC 12-15-46-3.

**Synopsis:** Payment of insurance premiums under Medicaid. Requires the office of the secretary of family and social services to apply for a Medicaid state plan amendment or a demonstration waiver to allow the office of the secretary to purchase for certain individuals coverage by a qualified health plan through the health benefit exchange operated in Indiana.

**Effective:** Upon passage.

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January 14, 2014, read first time and referred to Committee on Appropriations.

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Second Regular Session 118th General Assembly (2014)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2013 Regular Session and 2013 First Regular Technical Session of the General Assembly.

## SENATE BILL No. 370

A BILL FOR AN ACT to amend the Indiana Code concerning Medicaid.

*Be it enacted by the General Assembly of the State of Indiana:*

1 SECTION 1. IC 12-7-2-154.9 IS ADDED TO THE INDIANA  
2 CODE AS A **NEW** SECTION TO READ AS FOLLOWS  
3 [EFFECTIVE UPON PASSAGE]: **Sec. 154.9. "Qualified health**  
4 **plan", for purposes of IC 12-15-46-3, has the meaning set forth in**  
5 **IC 12-15-46-3(a).**

6 SECTION 2. IC 12-15-46-3 IS ADDED TO THE INDIANA CODE  
7 AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE  
8 UPON PASSAGE]: **Sec. 3. (a) As used in this section, "qualified**  
9 **health plan" means a health plan that has been certified under**  
10 **Section 1301 of the federal Patient Protection and Affordable Care**  
11 **Act (PPACA) (42 U.S.C. 18021(a)) to meet the criteria for**  
12 **availability through a health benefit exchange operated in Indiana.**

13 **(b) Before July 1, 2014, the office of the secretary of family and**  
14 **social services shall apply to the United States Department of**  
15 **Health and Human Services for a demonstration waiver or an**  
16 **amendment to the state Medicaid plan to allow the office of the**



1 secretary to, through the Medicaid program, pay premiums to  
 2 purchase for individuals coverage by a qualified health plan  
 3 through a health benefit exchange operated in Indiana. The state  
 4 plan amendment or demonstration waiver must seek to purchase  
 5 coverage for an individual whose income is not more than one  
 6 hundred thirty-eight percent (138%) of the federal poverty level  
 7 and who:

8 (1) is at least nineteen (19) years of age but less than sixty-five  
 9 (65) years of age; and

10 (2) is not:

11 (A) eligible for Medicaid in Indiana; and

12 (B) eligible to participate in Medicare.

13 The office of the secretary may require cost sharing by the  
 14 individual in obtaining and maintaining coverage under the  
 15 qualified health plan.

16 (c) The office of the secretary may not implement a state plan  
 17 amendment or waiver under this section until the office of the  
 18 secretary files an affidavit with the governor attesting that the state  
 19 plan amendment or federal waiver applied for under this section  
 20 is in effect. The office of the secretary shall file the affidavit under  
 21 this subsection not later than five (5) days after the office of the  
 22 secretary is notified that the state plan amendment or waiver is  
 23 approved.

24 (d) If the office of the secretary receives approval for the state  
 25 plan amendment or waiver under this section from the United  
 26 States Department of Health and Human Services and the  
 27 governor receives the affidavit filed under subsection (c), the office  
 28 shall implement the state plan amendment or waiver not more than  
 29 sixty (60) days after the governor receives the affidavit.

30 SECTION 3. An emergency is declared for this act.

